## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09944694

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			18					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			18 minus 20=		• -			X\$ 9=		OR	X\$18=	1
INDEPENDENT CLAIMS			3′ minus 3 =		• /			X40=		OR	X80=	
MU	LTIPLE DEPENI	DENT CLAIM P	RESENT		20			+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in						olumn 2	L	TOTAL		OR'	TOTAL	
CLAIMS AS AMENDED - P (Column 1) (C					PART II Column 2) (Column 3)			SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS	HIGH		EST			ADDI-	<u>.</u>		ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- OL	=		X40=	1	OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							¹	+135=	1 2	OR	+270=	
							L <sub>.</sub>	TOTAL DDIT. FEE	-	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=	11	X\$ 9=	. • • •	OR	X\$18=	14 18
	Independent	*	Minus	***		=	4 [	X40=	-	OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+135=	•	OR	+270=	
							A	TOTAL ODIT. FEE	• 1	OR	TOTAL ADDIT. FEE	
	S.	(Column 1)			mn 2)	(Column 3)	_					* *
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	Jſ	X\$ 9=		OR	X\$18= ·	7 -
	Independent	<b>*</b> :•-	Minus	***		=	<b>↓</b>	X40=		OR	X80=	· · · · ·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		mber Previously P her Previously Pa							oropriate bo	x in co	iumn 1.	. •